



THE HIGH SCHOOL OF

SAINT THOMAS MORE

#1

Living the Faith Proposal

Student _____ Class of 20 _____ Project Dates: from _____ to _____

Supervising Agency _____

Supervisor's Name _____

Agency Address _____

City, State, Zip _____ Telephone _____

Answer each question thoroughly!

Describe your project – what will you be doing on a day to day basis. Be specific.

How will this project connect with a Corporal or Spiritual Work of Mercy?

Liability Disclaimer

All signatories to this Proposal understand that the completion of *Living the Faith* is a requirement for graduation from The High School of Saint Thomas More. They understand that participation in acceptable projects is at the discretion of the student and parents, and that The High School of Saint Thomas More assumes no responsibility for accident or injury involving the student or others while participating in a project outside of school hours and not supervised by school personnel. They understand the risks that such participation presents to the student, including but not limited to serious personal injury or death. Any questions the signatories have concerning the program have been answered. In consideration for the student being allowed to participate in this program, they **hereby release and agree to indemnify and hold harmless** the Diocese of Peoria, The High School of Saint Thomas More and their employees and agents, and volunteers assisting the school, from any and all liability for injuries, damages, medical expenses, or any other loss to the student or student's family (including attorney's fees) arising from or related to the student's participation in this program. We understand that the supervisor of this project will keep an accurate record of the student's hours and will, at the completion of the project, evaluate the student's performance.

Student Date Project Supervisor Date

Parent or Guardian Date Chaplain Date